Project Request (Call for Appointment)

This form is for the use of academic institutions that wish to request a Fulbright Senior Specialist. The completed form must be e-mailed to the U.S. Embassy at the address listed in the gray box at the bottom of this page. For possible reimbursement of local costs (housing, meals, transportation) pls contact Ms. Marija Crnic at the Ministry of Science, Education and Sports, at marija.crnic@mzos.hr.

The recruitment effort for your program request can be most effective if:

- 1. Careful attention is given to the **Program Description** and the **Purpose of the Program** to ensure adequate detail in describing the scope of work
- 2. Adequate lead time is given for recruitment of specialists who best fit the program request. Please allow a minimum of three months of lead time before the requested start date.
- 3. Flexibility in the timeframe of the proposed project is allowed in order to accommodate the various schedules of potential Fulbright Senior Specialists candidates

Contacts Host Institution	
Institution Name Street address 1 Street address 2 City State Country Zip/postal code Phone Fax e-mail web address Contact family name Contact first name Contact title	

Post -- [This section to be filled out by U.S. Embassy]

Institution type X post

Street address 1 (institution name) American Embassy
Street address 2 T. Jeffersona 2

Street address 3

 City
 Zagreb

 Country
 Croatia

 Zip/postal code
 10010

web address <u>www.usembassy.hr</u>

Officer or responsible official from post or commission making request

Prefix Ms.
Family name Brlek
First name Aleksandra

 Title
 Cultural Specialist

 Phone
 385-1-661-2243

 Fax
 385-1-665-8936

 e-mail
 brleks@state.gov

Program Description

Field requested (Choose only one primary field)
Primary Fields ☐ Agriculture
Applied Linguistics/TEFL
Biology Education
Business AdministrationChemistry Education
Communications / Journalism
Education
Engineering Education
Environmental Science
Information Technology
☐ _Law ☐ _Library Science
☐ Math Education
Peace and Conflict Resolution Studies
Physics Education
Political Science
Social Work
Urban Planning
U.S. StudiesGENERAL
 U.S. StudiesHistory U.S. StudiesLiterature
U.S. Studies-Music
U.S. StudiesPopular Culture
U.S. Studies—Religion
U.S. Studies— Theater
U.S. StudiesWomen's Studies
Specialization desired within this field
Other fields of interest if this is an interdisciplinary request
Type(s) of activity requested
Present lectures at graduate and undergraduate levels
Participate in or lead seminars or workshops at overseas academic institutions
Conduct needs assessments, surveys, institutional or programmatic research
Take part in specialized academic programs and conferences
Consult with administrators and instructors of post-secondary institutions on faculty development
Develop and/or assess academic curricula or educational materials
Conduct teacher-training programs at the tertiary level
Project description (please be very specific as to the type of and scope of work that the specialist would engage in; if
teaching – number of classes, topics.)
Project purpose (Describe the program objectives and provide background on the issues and institutions involved.)
- 1- 1

Project impact on host institution (plea institution, students, faculty):	ase comment how would this visit benefit your
Project potential for institutional linkage exchanges, etc):	ges (please explain plans for future collaboration,
Program Length • A Senior Specialists grant may be fund travel days.	ed for anywhere between 14 and 42 days, including
Please list the preferred arrival date below	
Visit Preferred arrival date Leng	gth of visit (Number of days)
institution's flexibility.	ease describe the extent, in days or months, of the host
Specialist Description	
Qualifications preferred	
Basic Profile	□ Academic □ Professional □ Either
Minimum academic degree	
Minimum years of teaching experience	
Minimum academic rank	
Language requirements	
	evel of grantee expertise needed for a program is to know ndergraduate students, faculty, etc. Please describe.
submission the names of lecturers particularly interested. Foreign in with the understanding that the in	n the Roster?

Requested Specialist Information
Name of person requested (Surname, first name) Title Institution Email Phone
Please provide justification for requesting this person (explain why you want this particular person):
Has the host institution had prior contact with the requested specialist about this program?
If so, please advise of the results of those contacts:
Cost Share Commitment
Costs for the Fulbright Senior Specialist Program will be shared by the Office of Academic Exchange Programs and the host institution. The Office of Academic Exchange Programs will pay for international travel and a daily honorarium. Host academic institutions will be asked to cover the Fulbrighter's lodging , meals and in-country travel . Public Affairs Sections will function as program brokers and will not contribute to program costs. In those cases where a host academic institution is unable to cover its share of program costs, the Croatian Ministry of Science, Education and Sports should be approached for reimbursement of the local costs.
At this time, please confirm the cost-share details to be shared with the Senior Specialist grantee chosen to fill this program request. It is important to note that the potential host institution must agree to cover the grantee's lodging, meals and in-country travel in order for the request for a Fulbright Senior Specialist to be approved.
Contact Information for Person Responsible for Housing Arrangements: Name Professional Title E-mail Phone
Lodging Arrangements Briefly describe the housing arrangements that have been made for the Senior Specialist (Housing for the duration of the stay should be arranged ahead of arrival):
Housing is available from(date) to (date). Estimated US\$ amount:
Does the host institution agree to cover this portion of the cost share? YES NO
In-Country Travel Arrangements Describe anticipated in-country travel:
Does the host institution agree to cover this portion of the cost share? YES NO

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stimated US\$ amour	nt:
arrival Arrangements	
escribe arrangeme	nts for the Specialists arrival and pickup from the airport, and the name of the
erson meeting the S	pecialist:
	pecial notes or instructions to the Senior Specialist regarding in-country details tha reparing for his/her arrival: